PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10603866

CLAIMS AS			Column		(Column 2)			SMALL ENTITY TYPE		00	OTHER SMALL	
TOTAL CLAIMS			10		(O)(d)(1)(2)			RATE	FEE	OR.	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE			BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			in		NOWIDER EXTRA				373.00	OR	3	750.00
TC	TAL CHARGEA	/ <i>U</i> minus 20=		*			X\$ 9=		OR	X\$18=		
70.	DEPENDENT CL	A STATE OF THE STATE OF	() minus 3 =					X42=		OR	X84=)
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* f	the difference	in column 1 is	less than ze	ro, enter	r "0" in c	olumn 2		TOTAL	204	OR	FOTAL:	
	c	LAIMS AS A	MENDED	- PAR	TII			TOTAL	<u> </u>	ייטן	OTHER	THAN
***		(Column 1)	Maria Artic	(Colur		(Column 3)		SMALL-	ENTITY	OR	SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
JW	Independent	*	Minus	***		=) - I	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			1140-			+280=	
Å.	Marie de la compa					÷ .	1	+140≠ TOTAL		OR	TOTAL	
							7	ADDIT. FEE		OR	ADDIT FEE	
AL2		(Column 1) CLAIMS	EAST-NEW	(Colur		(Column 3)	l r	, in				
AMENDMENT B		REMAINING AFTER AMENDMENT	建筑	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	4	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							St. Sal		OL.	38.2	
		e e e e e e e e e e e e e e e e e e e						+140=		OR	+280≐	
							1	TOTAL ADDIT, FEE	n entit	OR.	TOTAL ADDIT: FEE	ALESTI
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT.		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	,	Minus	**		=		X\$ 9=		OR:	.X\$18⇒	
ME	Independent	* 1	Minus	***		=,		X42=		State Programme	X84=	8. 42° /2
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-/		OR		
	IS All a gradure to the				0		3)	+140=		OR	+280=	
**	If the "Highest Nu	mn 1 is less than the mber Previously P	aid For" IN THI	S SPACE i	s less tha	n 20, enter "20."	, <u> </u>	TOTAL DDIT. FEE		OR	TOTAL ADDIT: FEE	4. A.
***	n the "Highest Nu The "Highest Nun	mber Previously P nber Previously Pa	aid For" IN THI id For" (Total o	S SPACE I	is less tha ent) is the	n 3, enter "3." highest numbe			propriate box	x in co	X	